

RESIDENT RAPTOR CAPTURE LICENSE APPLICATION FOR THE YEAR 2015

FEE - \$38.00

No person shall receive more than two (2) general raptor capture licenses **OR** one (1) general raptor capture license and one (1) limited quota raptor capture license in any calendar year. No person shall receive more than one (1) limited quota raptor capture license in any calendar year.

Applications for general raptor capture licenses for all raptor species will be accepted January 1 through December 31 for all the calendar year in which the license is valid. Separate applications and fees should be submitted for each raptor applied for. Applications for limited quota raptor capture license for peregrine falcons shall be submitted not later than March 1 during the calendar year in which the licensee intends to take a peregrine falcon. All applications must be submitted to the License Sales and Accounting Section as indicated below.

The Department on a drawing basis may issue a maximum of five (5) limited quota raptor capture licenses to capture peregrine falcons annually. In the drawing, four (4) licenses shall be reserved for residents and one (1) license shall be reserved for non-residents.

Applicant applying for:

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GENERAL RAPTOR CAPTURE LICENSE: Accipitriformes, Falconiformes (except Peregrine falcon), Stringiformes as listed in 50 CFR 10.13.
Application period: January 1 – December 31.

GENERAL RAPTOR CAPTURE LICENSE: Golden eagles shall only be taken in accordance with Commission Regulation, Chapter 25, Falconry Regulation, Section 8.

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LIMITED QUOTA CAPTURE FALCON LICENSE: (Peregrine Falcon)
Application period: January 1 – March 1.

FALCONRY PERMIT NUMBER:

_____ USFWS Issued Permit Permit #: _____

_____ State Issued Permit Permit #: _____ State Issued: _____

LAST NAME

FIRST NAME and Middle Initial

_____/_____/_____
DATE OF BIRTH (Month/Day/Year)

SOCIAL SECURITY NUMBER (Required)

Hair Color

Eye Color

Gender

Weight

Height (Feet/Inches)

MAILING ADDRESS

CITY

STATE

ZIP CODE

PHYSICAL ADDRESS

CITY

STATE

ZIP CODE

SPORTSPERSON I. D.

PHONE NUMBER

PROOF OF WYOMING RESIDENCY:

YRS WY RES. or Days Active Military in WY

ONE of the following must be provided:

WY Driver's License Number or WY ID Card Number

OR

Complete the PROOF OF RESIDENCY form ON REVERSE SIDE

Under penalty of prosecution, I swear or affirm that the information given by me on this application is true and correct. I swear, under penalty of prosecution, that I am a Wyoming Resident as defined in W.S. 23-1-102(a)(ix)(xv) and 23-1-107 and have been domiciled in Wyoming for not less than one (1) year and have not claimed residency elsewhere for any purpose during the one (1) year immediately preceding the date of application for this license(s). See Page 12, Section 13 (p)

Under penalty of prosecution, I swear that the information given by me above and below my signature is true and correct. I swear, under penalty of prosecution that I am a Wyoming resident as defined in W.S. 23-1-102(a)(ix)(xv) and 23-1-107 and have domiciled in Wyoming for not less than one (1) year and have not claimed residency elsewhere for any purpose during the one year immediately preceding the purchase of this license.

APPLICANT'S SIGNATURE

DATE

A COPY OF YOUR PERMIT TO PRACTICE FALCONRY FROM A STATE MEETING FEDERAL FALCONRY REQUIREMENTS **MUST** ACCOMPANY THIS APPLICATION.

Please mail completed application, copy of your falconry permit and proper fee to:

Wyoming Game and Fish Department, License Sales and Accounting Section, 5400 Bishop Blvd, Cheyenne, WY 82006-0001

PROOF OF WYOMING RESIDENCY

If you do not have a current Wyoming driver's license or a current Wyoming Identification card, the following information must be provided (Please Print). FAILURE TO PROVIDE THIS INFORMATION SHALL RESULT IN THE DENIAL OF A LICENSE BEING ISSUED.

PLEASE PROVIDE A VERIFIABLE ANSWER TO ONE OF THE FOLLOWING (Please Print):

1. I, or the person for whom I am applying (Resident applicant under the age of 18), have/has resided at the following address(es) for the past one (1) year immediately preceding the date of this application:

_____/_____
Street Address Mailing Address

2. Current or last Wyoming School attended: _____ Location: _____
3. I was a resident of Wyoming at the time I entered the military and have continued serving in active military duty; AND I have no claim of residency in any other state for any purpose.
_____ YES, I meet the above criteria per W.S. § 23-1-107
4. I was stationed in Wyoming for ninety (90) days or more, but was NOT a Wyoming resident when I entered the military; AND am currently an active member of the military; AND I have made no claim of residency in any other state territory or country for any purpose; AND I have maintained my voter registration in Wyoming.
_____ YES, I meet the above criteria per W.S. § 23-1-107
5. If Active Duty Military, I hereby certify under penalty of perjury that the United States _____ (Branch) has permanently stationed me at _____ (Station) Wyoming as of _____ (Date) and I am prepared to produce a copy of the Official Orders upon request.
6. If a minor dependent, name of parent or legal guardian who is a Wyoming Resident: _____

I further understand that the Wyoming Game and Fish Department will check the information provided to verify applicant's residency in the state of Wyoming.

Resident Applicant's Signature

OR

Parent/Guardian Signature
(Resident Applicant Under age of 18)